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FIRST NAMED INVENTOR

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

FILING DATE

GODFREY & KAHN S.C. 780 NORTH WATER STREET MILWAUKEE, WI 53202

APPLICATION NO.

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| Sonali S. Srivastava   | (Depositor's name) |  |
|------------------------|--------------------|--|
| /Sonali S. Srivastava/ | (Signature)        |  |
| 8/28/06                | (Date)             |  |

ATTORNEY DOCKET NO.

CONFIRMATION NO.

| 10/711,328<br>FITLE OF INVENTION   | ·                         |                            | Brian Arnott  |                        | 060494-0002                | 5327              |  |
|--|---------------------------|----------------------------|---|------------------------|----------------------------|-------------------|--|
| METHOD AND A   | APPARATUS FOR REM         | OVING OIL SPILLS           | AND EXTINGUISHING   | FIRES                  |                            |                   |  |
| APPLN, TYPE  | SMALL ENTITY              | ISSUE FEE DUE              | PUBLICATION FEE DUE   | PREV. PAID ISSUE FEE   | TOTAL FEE(S) DUE           | DATE DUE          |  |
| nonprovisional   | YES                       | \$700                      | * · · ·   | \$700 08/31/2006       |                            |                   |  |
| EXAM   | INER                      | ART UNIT                   | CLASS-SUBCLASS  |                        |                            |                   |  |
| GORMAN, DAI  | RREN W                    | 3752                       | 169-047000  |                        |                            |                   |  |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.      ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignce is identified below, no assignce recordation as set forth in 37 CFR 3.11. Completion of this form is NO (A) NAME OF ASSIGNEE GLASS PLUS, LLC |                           |                            | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignce is identified below, the document has been filed if a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  2602 MCKAY ROAD  TOMAHAWK, WISCONSIN 53719 |                        |                            |                   |  |
| lease check the appropr  | iate assignee category or | categories (will not be pr | rinted on the patent):  | Individual 🔲 Corporati | ion or other private group | entity Government |  |
| a. The following fcc(s) are submitted:  Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies   |                           |                            | <ul> <li>D. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)</li> <li>☐ A check is enclosed.</li> <li>☐ Payment by credit card. Form PTO-2038 is attached.</li> <li>☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number07-1509 (enclose an extra copy of this form).</li> </ul>  |                        |                            |                   |  |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.

Authorized Signature / Sonali S. Srivastava/

Typed or printed name Sonali S Srivastava

interest as shown by the records of the United States Patent and Trademark Office.

■ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

8/28/06

Registration No. 52,248